



**Atty Docket No.:** 16159/091001; P5939

**Inventor:** David S. Allison

**Application No.:** 09/977,508-Conf. #3995

**Filing Date:** October 12, 2001

**Title:** METHOD AND APPARATUS FOR EXTENDING A PROGRAM ELEMENT IN A  
DYNAMICALLY TYPED PROGRAMMING LANGUAGE

**Documents Filed:**

Submission of Substitute Declaration (1 page)

*Declaration (4 pages)*

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**Sender's Initials:** RPL/AZD/bcm

**Date:** December 3, 2004 *JMS*



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Date In 12/03/04 Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$ 13.65
Time In 4:06 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight 2.50 lbs. ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials UJ	Total Postage & Fees \$ 13.65

## DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		
Customer Signature		

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16159/091001 KL/ATG/bcm

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Attorney Docket No.: 16159/091001; P5939

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Response to Office Action mailed September 13, 2004.